

**WESLEY COLLEGE
FACULTY/STAFF PLEDGE FORM**

(Please complete all 4 sections and return form to Bill Pritchard, Vice President for Institutional Advancement.)

SECTION 1 – My Information

Name _____ Today's Date _____
(Title) (First) (Middle/Maiden) (Last) (Preferred Name)

Home Address _____ City _____ State _____ Zip _____

Home Phone _____ Preferred Email _____

Wesley Alumnus? ___ Yes, Class of _____ Wesley Parent? ___ Yes, Student's Name _____

Wesley Department _____ Position/Title _____ Campus Bldg/Rm# _____

Is this a joint gift? ___ Yes, Spouse Name _____ Spouse Wesley Alumnus? ___ Yes, Class of _____

SECTION 2 - My Commitment

_____ I would like to commit \$ _____ annually. *Gifts of \$1,000 or more annually secures your membership in the Wesley Society.*

_____ I currently give \$ _____ annually and commit to continue this gift.

_____ I would like to increase my current commitment to \$ _____ annually.

_____ My spouse works for a matching gift company. I am enclosing a completed form to increase my gift.

SECTION 3 - Method of Payment

_____ Payroll Deduction. My number of annual paychecks = _____ Please deduct \$ _____ from each paycheck. (Round up to the next cent for multiplied amount to reach desired total in section above. Example: \$41.67 x 24 paychecks = \$1,000.08)

My signature below gives the Finance Office authority to deduct gift amounts from my paychecks. I understand that my contribution will begin on the next pay period and will continue as directed until I request it to end or change the amount (increase/decrease). To make any change, I understand that I must notify the Office of Institutional Advancement in writing fifteen days before the next pay period.

Signature: _____ Date: _____

_____ My check for \$ _____ is enclosed. (Please make checks payable to Wesley College)

_____ I will make my online gift via credit card (Visa, Mastercard, Discover, AMEX) at alumni.wesley.edu/onlinegiving Please circle desired option:

1) Ongoing gift in amount of \$ _____ (set amount continues until request in writing to end) charged monthly/quarterly/twice a year/annually

2) Annual gift in amount of \$ _____ paid all at once

3) Annual gift in amount of \$ _____ paid in scheduled installments monthly/quarterly/twice a year

_____ I would like to learn more about Planned Giving options.

SECTION 4 - Please apply my gift to

_____ Wesley Fund (supports scholarships and other critical needs)

_____ W Club (select option below)

_____ Academics – Specific Program _____

_____ General Athletics OR _____ Specific Sport _____

_____ Endowed Scholarship Fund (specify) _____

_____ Other _____

THANK YOU!

Your gift is greatly appreciated and tax deductible to the full extent of the law.

Departmental Use Only (Do not write below this line)

Date Processed _____ Initials _____ Payroll Deduction: Notification Start Date _____ Initials _____ End Date _____ Initials _____

Monthly Gift Amount \$ _____ x _____ months per year = Total Annual Gift Amount \$ _____

Note _____